FY 2012 Substance Abuse Treatment Appropriations:

Problem Solving Courts

As Approved by the Drug Court and Mental Health Court Coordinating Committee on May 26th, 2011.

STATEMENT AND INTRODUCTION:

The Drug Court and Mental Health Court Act emphasizes forging partnerships with other public agencies and community organizations in order to promote effective interaction and use of resources among the courts, justice system personnel and community agencies. While there have been recent changes in the way funds are appropriated for problem-solving court substance abuse treatment, the courts remain committed to maintaining a comprehensive and integrated statewide system offering effective assessment, treatment and recovery support services to the offender population. To this end we anticipate continued collaborative planning with our criminal justice system partners to assure high-quality, evidence-based services, accountable fiscal management and a responsive management information system.

APPROPRIATION:

The Idaho Legislature submitted and the Governor signed House Bill 338; which appropriated \$4,827,700 to the Supreme Court for substance abuse treatment for problem-solving courts. The breakdown of this appropriation is detailed below and is equal to the level of funding for treatment in FY2011:

From: General fund \$1,594,800

Substance abuse treatment fund \$3,232,900

Total \$4,827,700

OVERVIEW:

For FY 2012 the process for providing substance abuse treatment for problem solving courts will remain very similar to what has occurred in FY 2011. The procedures for intake approval, which authorizes payment for treatment, processing payments to providers for treatment, compiling data on treatment expenditures, and the termination of participants from the treatment system will not change significantly in FY 2012. We will continue to work through DHW and BPA as is currently the process.

As we work towards FY 2013 and beyond we expect to rely more on WITS (and less on BPA) as a treatment management information system. Further examination of the WITS system and its

modules is underway. A Drug Court and Mental Health Court Coordinating Committee Subcommittee will be established by June 15th, 2011 to develop FY 2013 plans prior to October of 2011.

The following plans adopted by the Drug Court and Mental Health Court Coordinating Committee (pursuant to IC 19-5606) pertaining to the substance abuse treatment appropriations for FY 2012:

RECOMMENDATIONS:

Assessment, Treatment & Recovery Support Services:

Admission to substance abuse treatment – Authorization: Problem-Solving Courts will continue the current process for treatment authorizations, with the intake form filled out by a drug or mental health court coordinator, in order to initiate the treatment billing. As has been developed over this past year, the coordinator would retain their control over the intake/authorization process as well as the termination of services.

Authorized as a "Voucher": <u>The Coordinator will authorize treatment, as a "voucher" for treatment services, limited by 545 days or 18 months.</u>

Data entry and payment for services: <u>Problem-Solving Courts will continue to utilize BPA to process the intake, enter client data, enter data on financial eligibility and the established sliding scale fee, enter the consent for release of information, and process termination forms that are submitted by the coordinators.</u>

Description of Covered Services & Level of Care: Problem-Solving Courts will continue with the suspension of substance abuse treatment funds for Adult Drug Court Populations (Felony Drug Court, Misdemeanor/ DUI Drug Court, and DUI Court) in FY 2012 for residential treatment and for intensive outpatient, with the option for the Statewide Drug Court and Mental Health Court Coordinator (or designee) to approve offenders for access to those services in limited circumstances. Currently, The Management Service Contractor (MSC) Business Psychology Associates (BPA) seeks approval for the suspended services prior to authorization, but in FY 2012 we would expect any exceptions to be formally requested by the coordinator prior to submission to BPA.

Treatment Plan: The treatment provider will continue to work with the problem-solving court team to develop the individualized treatment plan, including any recommended level of care beyond outpatient treatment.

Fiscal Management: The Supreme Court Administrative Office will continue to receive and distribute expenditure information to Coordinators. Currently, DHW is provided expenditure

and treatment episode data by BPA; DHW provides a copy of selected elements of that data to the Court; and the Court translates this information into reports that are distributed monthly to each District/ Court. Additional reports have been requested of BPA/ DHW, including a report that identifies "outliers" in terms of actual versus expected per client expenditures, as well as total expenditures per client over the lifetime of the treatment episode.

In FY 2012 there will be some additional financial restraint by. Some of the Direct Client Services currently provided by BPA will be eliminated. Reviewing the expenditure data provided by the state, we have projected that approximately \$165,129 of the substance abuse treatment funds for FY 2011 will be spent on what are called "Direct Client Services" provided by BPA. We have coordinated with DHW and BPA to identify several Direct Client Services that will be discontinued while other DCS would be utilized only for Problem-Solving Court participants that access Medicaid as per federal requirements. We project approximately \$39,560 in savings for FY 2012 under expenditures for Direct Client Services.

Provider Network: <u>Problem-solving Courts will continue to use substance abuse treatment providers that are approved through DHW and are part of the provider network managed by BPA.</u>

Quality Assurance Process: The Drug Court and Mental Health Court Coordinating Committee will develop and implement, in coordination with problem-solving court teams and other criminal justice partners, a quality assurance plan that will serve to assure that treatment services are using evidence-based practices, are adhering to statewide Drug Court and Mental Health Court Guidelines and Standards, and are being delivered in an effective manner, within the level of available funds.

Shared Data/ Outcome Measures: For FY 2012, we will maintain our coordinated efforts through the substance abuse treatment system to measure and report outcomes as it relates to treatment provided to offenders by population. Although we will coordinate outcome measures with all others, preliminarily we plan to publish data for the following variables/ outcomes:

- a. #/ % of successful treatment discharges
- b. #/ % of unsuccessful treatment discharges
- c. Average LSI-R or LSCMI Score
- d. Level of Education (pre-post)
- e. Earnings (pre-post)
- f. Recidivism
- g. Average Length of Treatment and intensity/ frequency

APPROVED ALLOCATIONS BY PROBLEM-SOLVING COURT TYPE BY DISTRICT:

Felony Drug Court	FY2012 SUD T	x \$ Slots	Misd/ DUI Drug Court	FY2	2012 SUD Tx\$	Slots
District 1	\$ 403,520	104	District 1	\$	182,360	47
District 2	\$ 194,000	50	District 2	\$	89,240	23
District 3	\$ 446,200	115	District 3	\$	_	0
District 4	\$ 907,920	234	District 4	\$		0
District 5	\$ 388,000	100	District 5	\$	135,800	35
District 6	\$ 182,360	47	District 6	\$	248,320	64
District 7	\$ 469,480	121	District 7	\$	446,200	115
Total	\$ 2,991,480	771	Total	\$	1,101,920	284

Juvenile Drug Court	FY2	012 SUD Tx \$	Slots	Mental Health Court	FY20	12 SUD Tx\$	Slots
District 1	\$.	0	District 1	\$	-	40
District 2	\$	***	0	District 2	\$	-	25
District 3	\$	_	0	District 3	\$	24,250	25
District 4	\$	135,800	35	District 4	\$	24,250	40
District 5	\$	97,000	25	District 5	\$	24,250	25
District 6	\$	124,160	32	District 6	\$	•	25
District 7	\$	77,600	20	District 7	\$	24,250	45
Total	\$	434,560	112	Total	\$	97,000	225

<u>APPROVED STATEWIDE ALLOCATIONS OF DRUG COURTS AND MENTAL HEALTH COURTS BY DISTRICT:</u>

Statewide PSC SUD Tx \$	Totals	Slots
District 1	\$ 585,880	191
District 2	\$ 283,240	98
District 3	\$ 470,450	140
District 4	\$ 1,067,970	309
District 5	\$ 645,050	185
District 6	\$ 554,840	168
District 7	\$ 1,017,530	301
Totals	\$ 4,624,960	1392

In FY 2011, \$4000 per slot is allocated for treatment. The BPA Direct Client Services previously described cost an average \$120 per slot. Thus the FY2011 allocation for <u>actual</u> treatment is \$3880.

Appropriation = \$4,827,700

Recommendations for Treatment Services = \$4,624,960

Difference = \$202,740

This amount is currently available to pay for BPA services per client as previously described and to develop a more focused quality assurance process tied to soon to be adopted Drug Court and Mental Health Court Guidelines and Standards and evidence-based practices for the treatment of the substance dependent criminal offender. It is anticipated that the BPA costs will be approximately \$150,000 of the above \$202,740.

RECOMMENDATIONS: FY 2012 Capacity per Problem-Solving Court

District	County/Location	Court Type	Felon y	MISD/ DUI	DUI	Juvenil e	Menta I Health Court	Total s
1	Benewah	FDC	14	0	0	0	0	14
	Bonner	FDC	31	0	0	0	0	31
	Kootenai	FDC	47	0	0	0	0	47
	Kootenai	МНС	0	0	0	0	40	40
	Kootenai	DUI	0	0	47	0	0	47
	Shoshone	FDC	12	0	0	0	0	12
			104	0	47	0	40	191
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2	Clearwater	FDC	10	0	0	0	0	10
	Clearwater	МНС	0	0	0	0	15	15
	Latah	FDC	20	5	0	0	0	25
	Nez Perce	FDC	20	0	0	0	0	20
	Nez Perce	МНС	0	0	0	0	10	10
	Nez Perce	DUI	0	15	3	0	0	18
	Nez Perce	CPDC	0	0	0	0	0	0
			55	20	3	0	25	103
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3	Canyon	FDC	70	0	0	0	0	70
	Canyon	МНС	0	0	0	0	25	25
	Canyon	DUI	0	0	0	0	0	0
	Gem	FDC	20	0	0	0	0	20
	Tri	FDC	25	0	0	0	0	25
			115	0	0	0	25	140
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4	Ada-I	FDC	107	0	0	0	0	107
	Ada-II	FDC	107	0	0	0	0	107
	Elmore	FDC	20	0	0	0	0	20
	Ada	MHC	0	0	0		40	40
	Ada	JDC	0	0	0	35	0	35
			234	0	0	35	40	309
					State Committee	A company or homogeneous company or homogeneo		White the state of
5	Blaine	FDC	10	0	0	0	0	10
	Twin Falls Mini/Cassia, Jerome	FDC	90	0	0	0	0	90
	Twin Falls	MHC	0					
		,,,,,						

	Twin Falls	DUI	0	0	35	0	0	35
	Twin Falls	JDC	0	0	0	15	0	15
	Mini-Cassia	JDC	0	0	0	10	0	10
	District 5	CPDC	0	0	0	0	0	0
			100	0	35	25	25	185
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6	Bannock	FDC	28	0	0	0	0	28
	Bannock	MHC	0	0	0	0	25	25
	Bannock	DUI	0	5	25	0	0	30
	Bannock	JDC	0	0	0	32	0	32
	Caribou	FDC	4	0	0	0	0	4
	Caribou	MISD/DUI	0	7	0	0	0	7
	Franklin	FDC	15	0	0	0	0	15
	Oneida	MISD/DUI	0	9	0	0	0	9
	Power	MISD/DUI	0	18	0	0	0	18
	District 6	CPDC	0	0	0	0	0	0
			47	39	25	32	25	168
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7	Bingham	FDC	30	0	0	0	0	30
	Bingham	МНС	0	0	0	0	10	10
	Bingham	MISD/DUI	0	30	0	0	0	30
	Bingham	JDC	0	0	0	5	0	5
	Bonneville	FDC	45	0	0	0	0	45
	Bonneville	MHC	0	0	0	0	25	25
	District 7	JMHC	0	0	0	0	0	0
	Bonneville	MISD/DUI	0	44	0	0	0	44
	Bonneville	CPDC	0	0	0	0	0	0
	Bonneville	JDC	0	0	0	10	0	10
	Butte/Custer	FDC	3	3	0	0	0	6
	Lemhi	FDC	3	11	0	0	0	14
	Madison/Jefferson/Fremont	FDC	30	0	0	0	0	30
	Madison/Jefferson/Fremont	МНС	0	0	0	0	10	10
	Madison/Jefferson/Fremont	MISD/DUI	0	27	0	0	0	27
	Madison/Jefferson	JDC	0	0	0	5	0	5
	Teton	MISD/DUI	10	0	0	0		10
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TOTALS			771	174	110	112	225	1392

Responsible Parties Processes Table for FY 2012

	FY 2012 Responsible Party
Function	F1 Z012 Responsible Fally
INTAKE*	PSC Teams
Identify potential clients	FOC Earls
Initial Screening	
financial, clinical	Provider w/ PSC Teams
client intake	BPA & Coordinator
Cheff Htake	
Assessment	
service authorization	Coordinator
payment authorization to provider	BPA
payment authorization to provider	BPA
payment to provide:	
Determine level of service and RSS	Provider and PSC Team
Determine level of service and KSS	The state of the s
SERVICE COORDINATION	
SERVICE COORDINATION	
Service Plan w/RSS needs	PSC Team with provider
Service I fan Wy NSS II Ceas	
Select Providers	PSC Team
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Service Authorization	Comment of the commen
service plan	PSC Team
level of service	Provider and PSC Team
	According to the Control of the Cont
Payment Authorization	
documentation of service	Provider and BPA
payment to provider	BPA
Continuous case management	PSC Team and Provider
ADMINISTRATIVE FUNCTIONS*	
	PSC Team
Utilization Management	AOC
Network Management	
provider approval	DHW

provider training	DHW/ AOC/ BPA
provider Q A	DHW/ AOC/ BPA
provider contracts	BPA
provider payments	BPA
Outcomes and Reporting	
data entry	BPA
regular performance reports	BPA
outcome measures reports	DHW/ AOC
provider performance reports	AOC/ PSC Team

^{*}May see slight differences of processes between problem-solving court types